



VA Overview



VA-DoD Sharing ...a Collaborative Partnership





FY 2007 VA Budget

- Requests \$34.3B for health care, an increase of \$3.5B (11.3%) over FY 2006, to serve 5.3M beneficiaries
- Continues the President's commitment for VA to work closely with DoD to ensure that service members returning from OIF and OEF and their families receive timely, high-quality services and benefits
- Proposes to increase co-pays for pharmaceuticals and to initiate a \$250 enrollment fee for higher income non-service connected veterans



Key VA/DoD Issues

- Health Executive Council (HEC) Initiatives
 - Demonstration Projects
 - Joint Incentive Fund Projects
- Seamless Transition
- TRICARE Issues
 - Becoming TRICARE Network Providers
 - Obtaining Authorizations
 - Impact of Proposed Increases in Cost Shares
- GAO Report
 - Performance Measures
 - Market Survey



HEC Initiatives

- Demonstration Projects:
 - One project being terminated – credentialing at San Antonio
 - Developing detailed lessons learned documents
 - LDSI and BHIE projects (San Antonio, El Paso and Madigan) will significantly enhance the ability of each system to review medical record information located in the other Department
 - Will be looking to export successes to other sites
- Joint Incentive Fund Projects – to be discussed in afternoon session



Seamless Transition

- Current efforts focus on severely injured
- VA social workers and benefits counselors assigned to high volume MTFs:
 - Walter Reed Army Medical Center (AMC) (DC)
 - Bethesda National Naval Hospital (Maryland)
 - Brooke AMC (San Antonio, TX)
 - Naval Hospital Great Lakes (Illinois)
 - Eisenhower AMC (Georgia)
 - Madigan AMC (Washington)
 - Camp Pendleton (California)
 - Ft. Carson (Colorado)



Seamless Transition (continued)

- Facilitate transfers from a MTF to VAMC
 - Polytrauma Centers
 - Other specialty centers (SCI, TBI, Blind Rehab)
- Initiate benefits claims process (monthly compensation checks)
- Offer other types of services:
 - Vocational Rehabilitation and Employment Program
 - Readjustment counseling services, including grief counseling for family members



TRICARE Issues

- VA is seeking to obtain authorized preferred provider status
- Authorizations
 - Need to work with DoD to facilitate process of obtaining authorizations
 - Conflicting policies between the Departments
- Impact of proposed increases in DoD cost shares for TRICARE
 - Shift of workload to VA under review
 - Coordination of Federal Benefits



GAO Report: VA and DoD Health Care: Opportunities to Maximize Resource Sharing Remain

- Recommendations:
 - Develop an evaluation plan to document and record the advantages and disadvantages of each DSS project to assist in replicating successful projects system-wide
 - Develop performance measures that would be useful for determining the progress of their resource sharing goals
- Acknowledges for the first time that sharing has shifted from using excess capacity to partnering and gaining efficiencies by leveraging resources or buying power jointly



VA Contacts

- **VHA Central Office contacts:**
 - (202) 273-5514
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 - (202) 273-8411
- **VA liaisons in place for three DoD regions:**
 - North
 - (703) 588-1882
 - South
 - (210) 292-3232
 - West
 - (619) 236-5309



Questions?